

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)Attorney Docket No.:
52493.000343

In re Application Of **Terry CADIGAN, et al.**
 Application Number **10/620,429**
 Filed **July 17, 2003**
 For **INSURANCE INFORMATION MANAGEMENT SYSTEM AND METHOD**
 Group Art Unit **4194**
 Examiner **Robert A. SOREY**
 Confirmation No. **1099**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above-identified application.

The requested extension and appropriate fee is as follows:

- | | Large Entity | Small Entity | Amount |
|---|---------------------|---------------------|------------------|
| <input type="checkbox"/> One Month | \$ 130.00 | \$ 65.00 | |
| <input type="checkbox"/> Two Month | \$ 490.00 | \$ 245.00 | |
| <input checked="" type="checkbox"/> Three Month | \$1110.00 | \$ 555.00 | \$1110.00 |
| <input type="checkbox"/> Four Month | \$1730.00 | \$ 865.00 | |
| <input type="checkbox"/> Five Month | \$2350.00 | \$1175.00 | |
- ☐ Applicant claims small entity status. See 37 CFR 1.27.
- ☐ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. **50-0206**.
- I am the ☐ applicant/inventor.
- ☐ assignee of record of the entire interest. See 37 CFR 3.71
- Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).;
- ☒ attorney or agent of record.
- ☐ attorney or agent under 37 CFR 1.34(a).
- Registration number if acting under 37 CFR 1.34(a). _____

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

October 2, 2008

Date

Signature

James R. Miner

Typed or Printed Name

40,444

Registration Number (if applicable)

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 form(s) is/are submitted.